PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required), Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address; and reduced undersordered below of directed otherwise in Block 1, by (a) specifying a new correspondence address; and or "FEE ADDRESS" for indicated unless corrected below of directed otherwise in Block 1, by (a) specifying a new correspondence address; and or "FEE ADDRESS" for indicated unless or directed otherwise in Block 1, by (a) specifying a new correspondence address; and or "FEE ADDRESS" for indicated unless of the properties of the prope maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 7590 07/26/2011

BANNER & WITCOFF, LTD. 1100 13th STREET, N.W. SUITE 1200 WASHINGTON, DC 20005-4051

22907

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2883, on the date indicated below. (Clauston)

							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/562,840	06/22/2006		Devin Dressman		001107.00581		6445
TITLE OF INVENTION	: METHOD AND COM	POSITIONS FOR DETE	CTION AND ENUMERA	TION OF GENETI	C VARIA	TIONS	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	FEE T	OTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755 \$1510	\$300	\$0		\$1055	10/26/2011
EXAMINER		ART UNIT	CLASS-SUBCLASS				
WOOLWINE	, SAMUEL C	1637	435-006120	•			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.56s). Change of correspondence address (or Change of Correspondence Address form "FUOSBI 22) attached. "Fee Address" indication (or "Fee Address" Indication form PTOSBI 47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name with be printed.				
PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSIG THE JOHN	ess an assignee is ident h in 37 CFR 3,11. Comp GNEE US HOPKINS U	ified below, no assignee oletion of this form is NO	THE PATENT (print or ty data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY Baltimore, N	atent. If an assigned assignment. Yand STATE OR CARAND	OUNTRY)	cument has been filed for
4a. The following fee(s) a Issue Fee Publication Fee (N	o small entity discount p	Payment of Fee(s): (Plea A check is enclosed. Payment by credit car The Director is hereby overpayment, to Depo	d. Form PTO-2038	is attached	1.	,	
	s SMALL ENTITY state	is. See 37 CFR 1.27.	XX. Applicant is no long	ger claiming SMAL	L ENTITY	Y status. See 37 CF.	R 1.27(g)(2).
NOTE: The Issue Fee and interest as shown by the r	d Publication Fee (if req ecords of the United Sta	uired) will not be accepted tes Patent and Trademark	from anyone other than to Office.	he applicant; a regis	stered attor	rney or agent; or the	assignee or other party in
Authorized Signature	/Sarah A.	Kagan/		Date_Sep	tembe	er 23, 2011	
Typed or printed name Sarah A. Kagan				Registration N	o3:	2,141	
This collection of information an application. Confident	ation is required by 37 C iality is governed by 35 Lapplication form to the	FR 1.311. The information U.S.C. 122 and 37 CFR	n is required to obtain or r 1.14. This collection is est depending upon the indiv	etain a benefit by the imated to take 12 n	e public w	which is to file (and complete, including	by the USPTO to process) gathering, preparing, and

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark. Office, U.S. Department of Commerce, P.O. Box 1450, Alexandra, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandra, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.